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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: HIGHMORE HERALD		2. DATE: 9/30/09
3. FREQUENCY OF ISSUE: WEEKLY	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $23 In-state $26 Out-of State
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): P.O. BOX 435, HIGHMORE, HYDE, SOUTH DAKOTA 57345-0435		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): P.O. BOX 435, HIGHMORE, SD 57345-0435		
6. FULL NAME OF PUBLISHER: MARY ANN MORFORD		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
MARY ANN MORFORD	P.O. BOX 435, HIGHMORE, SD 57345-0435

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	1400	1400
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	210	194
2. Mail Subscription (Paid and or requested)	966	961
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1176	1155
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	44	44
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1220	1199
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	170	185
2. Return from News Agents	10	16
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1400	1400

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Mary Ann Morford
(Signature)

Owner/Publisher
(Title)

State of South Dakota)
§
County of HYDE)

Sworn to before me this 30 day of Sept., 2009

Mary E Hamlin
Notary Public

My commission expires: July 8, 2010

(Seal)

Form: SOS REC 051 7/2004